DATE DUE

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee prifiteations. maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Noie: Use Block I for any change of patrons)

SMALL ENTITY

2292

7590

07/09/2008

BIRCH STEWART KOLASCH & BIRCH P. O. BOX 747 FALLS CHURCH, VA 22040-0747



ISSUE FEE

Note: A cortificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Malling or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEB address above, or being facsimile transmitted to the USPTO (571)273-2885, on the date indicated below.

<u>eila Landa</u> (Depositor's name) Willaton (Տնրանար 300B (Date)

TOTAL FEII(S) DUE

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/509.120	11/29/2004	Masaru Yamakoshi	1516-0126PUS1	3292	

TITLE OF INVENTION:

APPLN. TYPE

METHOD OF DETIECTING MILD IMPAIRED GLUCOSE TOLERANCE OR INSULIN SECRETORY DEFECT

PUBLICATION FEE

NONPROVISIONAL:	NO	\$1440	\$300	10/09/2008 HG	EBREM2 00000052 022448"-"10509120
EXAMINEI	A	KT UNIT	CLASS-SUBCLAS	S 01 FC:1504	300.00 DA
MARTIN, PAUL C.	1657		435-015000	02 FC:1501 03 FC:8001	1510.00 DA
 Change of correspondence address or indication of "Fee Address CFR 1.363). Change of correspondence address (or Change of Correspondence address (or Change of Correspondence address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication for PTO/SB/47; Rev 03-02 or more recent) attached. Use of a C Number is required. 		(1) the n or agents (2) the n registere 2 register listed, no	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 BIRCH STEWART KOLAS		
3. ASSIGNEE NAME AND RE	SIDENCE DATA TO BE PRINTEL	ON THE PATER	(Print or type)		
PLEASE NOTE: Unicsa an recordation as set forth in 37	ussignee is identified below, no ass CFR 3.11. Completion of this form	ignee data will up is NOT a substitut	opear on the patent. If a se for filing an assignmen	n assignee is identi. t.	fied below, the document has been filed for
(A) NAME OF ASSIGNEE		(B) RESIDEN	ICH: (CITY and STATE	OR COUNTRY)	
ASAHI KASEI PHARMA CO	RPORATION	TOKYO, JA	PAN		
Please check the appropriate ass 4a. The following fee(s) are encl	entity discount permitted)	4b, Payment o	of Fec(s); k in the amount of the fector is hereby authorized.	e(s) is enclosed. TO-2038 is attached	er other private group entity Government . equired fee(s), or credit any overpayment, to
5. Change in Entity Status (fro	1.1. ENTITY status. Sec 37 CFR 1.2	7. 🗆 Б. Арр	licant is no longer claimi	ng SMALL ENTITY	/ status. See 37 CFR 1.27(g)(2).
The Director of the USPTO is re NOTE: The Issue Fee and Publi interest as shown by the records	quested to apply the Issue Fee and I eatinn Fee (if required) will not be a of the United States Patent and Trac	ublication Fee (if ceepted from anyo lemark Office.	any) or to re-apply any p one other than the applica	roviously paid issue nt; a registered attor	fee to the application identified above, ney or agent; or the assignce or other party in
Authorized Signature	72-00		Dat	October 8, 2008	
Typed or printed name Mark	(J. Nuell	•• •	_ `	istration No. <u>36.62</u>	
			the state of the ba	ود مناطب محمد عمد المناه	think is to file (and by the HSPT() to process)

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.